DISCLOSURE SUMMARY PAGE DR-2 DISCLOSURE (Rev. 12/2005) REPORT COMMITTEE NAME (Must be same as on Statement of Organization) For Office Use Only Henry County Republican Women Comm. # Logged In IMPORTANT: Indicate by # type of committee you are reporting for: 203 00 17 AH 9: 37 (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party Scanned (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Computer Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue Audited ____ CANDIDATE COMMITTEES ONLY: Political Party (if applicable) Candidate Name Office Sought District (if Senate or House) Late reports are subject to possible civil and criminal penalties. Pursuant to lowa Code section 68B.32A(7) the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports. 319-986-6101 TELEPHONE DATE SIGNED REPORT FOR (1) ELECTION /(2)NON-ELECTION YEAR. I AM FILING A Indicate by # Local Committees, enter Date of Election CHECK IF AMENDMENT TO REPORT DATED ____ County & Local Committees, enter County in ☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. which Election is held (You must continue to file reports until a DR-3 is filed.) STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)\$ 580.38 ADD TOTAL MONEY TAKEN IN THIS PERIOD 166.80 Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)..... Schedule F: Loans Received total (Attach Schedule F) Schedule H: Total Sales of Campaign Property (Attach Schedule H)..... (Schedule H applies to Candidates' Committees Only) SUB-TOTAL \$ 747.18 SUBTRACT TOTAL MONEY SPENT THIS PERIOD 212.74 Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) Schedule F: Loan Repayments total (Attach Schedule F)..... CASH ON HAND at the end of this reporting period (if final report balance must 534.44 be zero) (Attach DR-3).....\$ **UNPAID BILLS (From Schedule D - Attach Schedule D).....\$ **OUTSTANDING LOANS (From Schedule F - Attach Schedule F)......\$ YES ____ NO CONSULTANT BREAKDOWN (Schedule G Attached?) CANDIDATE COMMITTEES ONLY: \$ VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

FORM

FOR INSTRUCTIONS. SEE BACK OF FORM

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

	COMMITTEE NAME (Must be same as on Statement of Organization)		
Henr	y County Republican Women	-	-

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS			
CHECK THIS BOX IF AMENDING FORM				

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
09-09-08	ID#	Donations		\$ ^{166.80}	
	CK#			•	
	ID#			,	
	CK#				
	ID#				
	CK#				•
	ID#				
	CK#		·		
	ID#				
	CK#				
	ID#				
	CK#				
	iD#				
	Ск#				
	ID#				
	CK#		·		
	ID#				
	CK#		·		
	ID#				
	CK#		· ·		
			SUB-TOTAL		

TOTAL (if last page of this schedule)

\$ 166.80

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES			
CHECK THIS BOX IF AMENDING FORM				

COMMITTEE NAME (Must be same as on Statement of Organization)

Henry County Republican Women

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
09-09-08 09-09-08 09-09-08	ID# 1115 CH#17 1118	Dave Heaton, Candidate for Kent White, Candidate for Gary See, Candidate for Co	County Supervisors	\$50.00 \$ 25.00 25.00
09 - 15-08 09-15-08	ID# ₁₁₉ 1120 CK#	Doug Abolt, Candidate for Marionette Miller-Meeks C		50.00 50.00
10-13-08 10-13-08		Pork's Restaurant Pork's Restaurant	Guest meal Guest meal	6. 73 37 6. 73 37
	ID#			
	CK#			
	ID#		,	
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
			L SUB-TOTAL	\$

TOTAL (if last page of this schedule)

212.74

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

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